

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Massachusetts Republican State Congressional Committee

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		80412.05
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	554939.32									
(c) Total Receipts (from Line 19)	332075.00	2925758.75								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	887014.32	3006170.80								
7. Total Disbursements (from Line 31)	584454.47	2703610.95								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	302559.85	302559.85								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	5660.20									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Massachusetts Republican State Congressional Committee

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	298675.00	1841046.50
(ii) Unitemized	400.00	54910.88
(iii) TOTAL (add Lines 11(a)(i) and (ii)	299075.00	1895957.38
(b) Political Party Committees	0.00	55.00
(c) Other Political Committees (such as PACs)	33000.00	80922.37
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	332075.00	1976934.75
12. Transfers From Affiliated/Other Party Committees	0.00	948824.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	332075.00	2925758.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	332075.00	2925758.75

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	584454.47	1638252.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	584454.47	1638252.65
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	677026.52
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	388331.78
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	388331.78
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	584454.47	2703610.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	584454.47	2703610.95

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	332075.00	1976934.75
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	332075.00	1976934.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	584454.47	1638252.65
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	584454.47	1638252.65

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 78
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Pac Alvarez and Marsal

Mailing Address 2001 K Street, NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: 01111.C187121
Amount of Each Receipt this Period: 2500.00
Receipt

B. Full Name (Last, First, Middle Initial)
Gordon Asack

Mailing Address 400 Plain St

City State Zip Code
Brockton MA 02302

FEC ID number of contributing federal political committee. **C**

Name of Employer Best Effort Sent Occupation Best Effort Sent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 10 / 25 / 2010
Transaction ID: 01111.C186888
Amount of Each Receipt this Period: 2500.00
Receipt

C. Full Name (Last, First, Middle Initial)
James Bailey

Mailing Address 100 Summer St.

City State Zip Code
Boston MA 02110

FEC ID number of contributing federal political committee. **C**

Name of Employer Best Effort Sent Occupation Best Effort Sent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt: 11 / 01 / 2010
Transaction ID: 01111.C187187
Amount of Each Receipt this Period: 15000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 20000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 7 / 78
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
James Bailey
 Mailing Address 100 Summer St.
 City State Zip Code
 Boston MA 02110
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Best Effort Sent Best Effort Sent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00
 Date of Receipt: 11 / 01 / 2010
Transaction ID: 01111.C187188
 Amount of Each Receipt this Period: -5000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Jeffrey Barber
 Mailing Address 381 Beacon St
 City State Zip Code
 Boston MA 02116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 TA Associates Finance
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00
 Date of Receipt: 10 / 29 / 2010
Transaction ID: 01111.C187157
 Amount of Each Receipt this Period: 5000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Thomas Barker
 Mailing Address 437 Marlborough Street, #11
 City State Zip Code
 Boston MA 02115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Attorney Foley Hoag
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00
 Date of Receipt: 11 / 20 / 2010
Transaction ID: 01202.C187246
 Amount of Each Receipt this Period: 750.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**
TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 8 / 78
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 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Daniel Bathon

Mailing Address 23 Slocum Road

City State Zip Code
Lexington MA 02421

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Windspeed Ventures Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
10 / 15 / 2010

Transaction ID: 01016.C186615

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Thomas Black

Mailing Address 43 Jeffrey Road

City State Zip Code
Wayland MA 01778

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 20 / 2010

Transaction ID: 01202.C187253

Amount of Each Receipt this Period
250.00

Receipt

C. Full Name (Last, First, Middle Initial)
John Brock

Mailing Address 25 Windy Ridge Pkwy

City State Zip Code
Atlanta GA 30339

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Coca Cola Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 20000.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: 01111.C186731

Amount of Each Receipt this Period
10000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **12750.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) John Brock	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 25 Windy Ridge Pkwy	Transaction ID: 01111.C186732
	City State Zip Code Atlanta GA 30339	Amount of Each Receipt this Period -6500.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Coca Cola Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 13500.00	

B.	Full Name (Last, First, Middle Initial) John Brock	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 25 Windy Ridge Pkwy	Transaction ID: 01111.C186941
	City State Zip Code Atlanta GA 30339	Amount of Each Receipt this Period -4500.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Coca Cola Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 9000.00	

C.	Full Name (Last, First, Middle Initial) Mary Brock	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 781 Crandon BLVD Apt 604	Transaction ID: 01111.C186703
	City State Zip Code Key Biscayne FL 33149	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Housewife Housewife	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional)	-1000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 78
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Allan Chin

Mailing Address 7 Truman Rd

City State Zip Code
Peabody MA 01960

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
11 / 20 / 2010

Transaction ID: 01202.C187248

Amount of Each Receipt this Period
50.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Edward Choate

Mailing Address 27 Candleberry Ln

City State Zip Code
Weston MA 02493

FEC ID number of contributing federal political committee. **C**

Name of Employer Choate & Associates Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
10 / 23 / 2010

Transaction ID: 01111.C186885

Amount of Each Receipt this Period
2500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Mary Ann Choate

Mailing Address 27 Candleberry Ln

City State Zip Code
Weston MA 02493

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

Date of Receipt
MM / DD / YYYY
10 / 23 / 2010

Transaction ID: 01111.C186853

Amount of Each Receipt this Period
7500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **10050.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 78

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Mary Ann Choate

Mailing Address 27 Candleberry Ln

City State Zip Code
Weston MA 02493

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 1 0

Transaction ID: 01111.C186854

Amount of Each Receipt this Period

-5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Elizabeth Christensen

Mailing Address 74 Regent St

City State Zip Code
Cambridge MA 02140

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 15000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: 01111.C186916

Amount of Each Receipt this Period

15000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Elizabeth Christensen

Mailing Address 74 Regent St

City State Zip Code
Cambridge MA 02140

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: 01111.C186917

Amount of Each Receipt this Period

-5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 78

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Patricia Conrades

Mailing Address 344 Beacon Street

City State Zip Code
Boston MA 02116

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 6500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: 01111.C187091

Amount of Each Receipt this Period

-2500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Patricia Conrades

Mailing Address 344 Beacon Street

City State Zip Code
Boston MA 02116

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: 01111.C187090

Amount of Each Receipt this Period

3500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Nancy Crate

Mailing Address 820 Hale Street
DO NOT MAIL

City State Zip Code
Beverly MA 01915

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
At Home At home

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: 01111.C187081

Amount of Each Receipt this Period

10000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶

11000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 78
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Thomas Cunningham
 Mailing Address 6920 Blaisdell Rd
 City State Zip Code
Bethesda MD 20817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Nauticon Imaging Solutions Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
-5000.00
 Date of Receipt: 10 / 25 / 2010
Transaction ID: 01111.C186901
 Amount of Each Receipt this Period: -5000.00
 Receipt

B. Full Name (Last, First, Middle Initial)
Thomas Cunningham
 Mailing Address 6920 Blaisdell Rd
 City State Zip Code
Bethesda MD 20817
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Nauticon Imaging Solutions Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
5000.00
 Date of Receipt: 10 / 25 / 2010
Transaction ID: 01111.C186900
 Amount of Each Receipt this Period: 10000.00
 Receipt

C. Full Name (Last, First, Middle Initial)
Randi Cutler
 Mailing Address 220 Boylston St
 City State Zip Code
Boston MA 02116
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Best Effort Sent Best Effort Sent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
5000.00
 Date of Receipt: 10 / 23 / 2010
Transaction ID: 01111.C186883
 Amount of Each Receipt this Period: 5000.00
 Receipt

SUBTOTAL of Receipts This Page (optional) ► 10000.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 14 / 78
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Paul Dacier

Mailing Address 92 Woodland Street

City State Zip Code
Sherborn MA 01770

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
10 / 19 / 2010

Transaction ID: 01111.C186724

Amount of Each Receipt this Period
5000.00

Receipt

B. Full Name (Last, First, Middle Initial)
John Dalton

Mailing Address 32 Whaler Ln

City State Zip Code
Quincy MA 02171

FEC ID number of contributing federal political committee. **C**

Name of Employer Best Effort Sent Occupation Best Effort Sent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 23 / 2010

Transaction ID: 01111.C186865

Amount of Each Receipt this Period
500.00

Receipt

C. Full Name (Last, First, Middle Initial)
John Dalton

Mailing Address 1157 Hancock St.

City State Zip Code
Quincy MA 02169

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
10 / 23 / 2010

Transaction ID: 01111.C186866

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **10500.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 78
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Steven Dodge

Mailing Address 239 Summer St.

City State Zip Code
Manchester MA 01944

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Windover Development LLC Real Estate/Construction

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: 01111.C186892

Amount of Each Receipt this Period
5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Antonio Frias

Mailing Address 20 Cedar Street

City State Zip Code
Hudson MA 01749-1745

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
S & F Concrete Owner/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ -5000.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: 01111.C186898

Amount of Each Receipt this Period
-5000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Antonio Frias

Mailing Address 20 Cedar Street

City State Zip Code
Hudson MA 01749-1745

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
S & F Concrete Owner/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
10 / 25 / 2010

Transaction ID: 01111.C186897

Amount of Each Receipt this Period
15000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 15000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 78
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Jerold Gnazzo

Mailing Address 169 Commonwealth Ave

City State Zip Code
Boston MA 02116

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: 01111.C187112

Amount of Each Receipt this Period
1000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Doris Hearty

Mailing Address 27 Silver Hill Rd

City State Zip Code
Weston MA 02493

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: 01111.C186819

Amount of Each Receipt this Period
5000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Doris Hearty

Mailing Address 27 Silver Hill Rd

City State Zip Code
Weston MA 02493

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: 01111.C187122

Amount of Each Receipt this Period
10000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 16000.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 78

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

James Hearty

Mailing Address PO Box 2217

City State Zip Code
Del Mar CA 92014-1517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Clough Capital Investments

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 7500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 1 0

Transaction ID: 01111.C186818

Amount of Each Receipt this Period

5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Henry Helgeson

Mailing Address 17 Rutland Square

City State Zip Code
Boston MA 02118

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Merchant Warehouse CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 7 / 2 0 1 0

Transaction ID: 01111.C187078

Amount of Each Receipt this Period

1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Richard Henken

Mailing Address 3 Partridge Hill Rd

City State Zip Code
Dover MA 02030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
schochet Associates real estate

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: 01111.C186789

Amount of Each Receipt this Period

10000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

16000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 78

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
David Herro

Mailing Address 65 E Goethe

City State Zip Code
Chicago IL 60610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HALP Investments

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 7500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: 01016.C186599

Amount of Each Receipt this Period

7500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
David Herro

Mailing Address 65 E Goethe

City State Zip Code
Chicago IL 60610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HALP Investments

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: 01016.C186600

Amount of Each Receipt this Period

-5000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Regina Herzlinger

Mailing Address 560 Concord Ave

City State Zip Code
Belmont MA 02478

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Harvard Business School Professor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 1 0

Transaction ID: 01016.C186587

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 78
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Stephen Jeffries

Mailing Address 12 Brimmer St.

City State Zip Code
Boston MA 02108-1002

FEC ID number of contributing federal political committee. **C**

Name of Employer S.B. Jeffries Consultants Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2187.50

Date of Receipt MM / DD / YYYY
11 / 20 / 2010

Transaction ID: 01202.C187251

Amount of Each Receipt this Period 1875.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Darlene Jordan

Mailing Address 203 South Lake Trail

City State Zip Code
Palm Beach FL 33480

FEC ID number of contributing federal political committee. **C**

Name of Employer Helman Jordan Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ -5000.00

Date of Receipt MM / DD / YYYY
10 / 15 / 2010

Transaction ID: 01016.C186609

Amount of Each Receipt this Period -5000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Darlene Jordan

Mailing Address 203 South Lake Trail

City State Zip Code
Palm Beach FL 33480

FEC ID number of contributing federal political committee. **C**

Name of Employer Helman Jordan Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt MM / DD / YYYY
10 / 15 / 2010

Transaction ID: 01016.C186608

Amount of Each Receipt this Period 15000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 11875.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 78
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial) John Kaneb		Date of Receipt MM / DD / YYYY 10 / 21 / 2010
Mailing Address 34 Masconomo St		Transaction ID: 01111.C186794
City Manchester	State MA	Zip Code 01944
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -5000.00
Name of Employer Gulf Oil/HP Hood	Occupation CEO	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ -5000.00	

B.

Full Name (Last, First, Middle Initial) John Kaneb		Date of Receipt MM / DD / YYYY 10 / 21 / 2010
Mailing Address 34 Masconomo St		Transaction ID: 01111.C186793
City Manchester	State MA	Zip Code 01944
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15000.00
Name of Employer Gulf Oil/HP Hood	Occupation CEO	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

C.

Full Name (Last, First, Middle Initial) Jonathan Kutchins		Date of Receipt MM / DD / YYYY 10 / 21 / 2010
Mailing Address 28 Exeter St #703		Transaction ID: 01111.C186796
City Boston	State MA	Zip Code 02116
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer Exeter Group	Occupation Consultant	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional)	20000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 78
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
							17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Jonathan Kutchins

Mailing Address 28 Exeter St
#703

City Boston State MA Zip Code 02116

FEC ID number of contributing federal political committee. **C**

Name of Employer Exeter Group Occupation Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 21 / 2010
Transaction ID: 01111.C186797
Amount of Each Receipt this Period -5000.00
Receipt

B.

Full Name (Last, First, Middle Initial)
Scott Lemay

Mailing Address 94 Fox Run Rd

City Bolton State MA Zip Code 01740-2006

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Self employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 25 / 2010
Transaction ID: 01111.C186891
Amount of Each Receipt this Period 5000.00
Receipt

C.

Full Name (Last, First, Middle Initial)
Paul Levy

Mailing Address 84 High St.
Apt. 204

City Medford State MA Zip Code 02155

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Dentist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 29 / 2010
Transaction ID: 01111.C187141
Amount of Each Receipt this Period 1000.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 1000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 78
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Arthur Mabbett

Mailing Address 37 Powderhouse Rd Ext

City State Zip Code
Medford MA 02155

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mabbett and Associates Environmental Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: 01111.C186915

Amount of Each Receipt this Period
5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Linda McLane

Mailing Address 77 Dean Road

City State Zip Code
Weston MA 02493

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: 01111.C187155

Amount of Each Receipt this Period
2000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Paul Moore

Mailing Address 51 Baker Place

City State Zip Code
Newton MA 02462

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dwane Moris Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 6000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 1 0

Transaction ID: 01111.C186690

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **12000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 78
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Paul Moore

Mailing Address 51 Baker Place

City State Zip Code
Newton MA 02462

FEC ID number of contributing federal political committee. **C**

Name of Employer Dwane Moris Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: 01111.C186926

Amount of Each Receipt this Period
4000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
William Munsell

Mailing Address 2119 Windsong Circle

City State Zip Code
Wayzata MN 55391

FEC ID number of contributing federal political committee. **C**

Name of Employer United Health Group Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
-5000.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: 01111.C186696

Amount of Each Receipt this Period
-5000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
William Munsell

Mailing Address 2119 Windsong Circle

City State Zip Code
Wayzata MN 55391

FEC ID number of contributing federal political committee. **C**

Name of Employer United Health Group Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: 01111.C186695

Amount of Each Receipt this Period
10000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **9000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 78
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Frederick Muzi

Mailing Address 10 Powisset St.

City State Zip Code
Dover MA 02030

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: 01111.C186950

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Paul Noble

Mailing Address 110 Black Rock Drive

City State Zip Code
Hingham MA 02043

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 6000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 1 0

Transaction ID: 01111.C187099

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Dawn Nordblom

Mailing Address 200 Barnes Hill Road

City State Zip Code
Concord MA 01742

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Homemaker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: 01111.C186904

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 78
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Pamela Norley

Mailing Address 7 Edgehill Road

City State Zip Code
Hopkinton MA 01784

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fidelity Investments Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
10 / 18 / 2010

Transaction ID: 01111.C186771

Amount of Each Receipt this Period
2500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Pamela Norley

Mailing Address 7 Edgehill Road

City State Zip Code
Hopkinton MA 01784

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fidelity Investments Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: 01111.C186799

Amount of Each Receipt this Period
2500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Abiomed Inc. Pac

Mailing Address 22 Cherry Hill Drive

City State Zip Code
Danvers MA 01923

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: 01111.C186814

Amount of Each Receipt this Period
5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **10000.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 78
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Freedom First Pac

Mailing Address PO Box 9190

City State Zip Code
Saint Paul MN 55109

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
10 / 21 / 2010

Transaction ID: 01111.C186781

Amount of Each Receipt this Period
2500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Haleys Pac

Mailing Address PO Box 1186

City State Zip Code
Jackson MS 39215

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
11 / 17 / 2010

Transaction ID: 01130.C187243

Amount of Each Receipt this Period
1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Kimberly Pallotta

Mailing Address 180 Ash St

City State Zip Code
Weston MA 02493

FEC ID number of contributing federal political committee. **C**

Name of Employer Raptor Capital Management Occupation Investment Mgmt.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: 01111.C186835

Amount of Each Receipt this Period
10000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 13500.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 78
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)
Anastasios Parafestas

Mailing Address 29 Westwood Dr.

City Worcester State MA Zip Code 01609

FEC ID number of contributing federal political committee. **C**

Name of Employer The Bollard Group Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 22 / 2010

Transaction ID: 01111.C186813

Amount of Each Receipt this Period 4500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Michael Pascucci

Mailing Address 454 Grove St

City Needham State MA Zip Code 02492

FEC ID number of contributing federal political committee. **C**

Name of Employer Rose Grove Capital Occupation Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ -5000.00

Date of Receipt 10 / 21 / 2010

Transaction ID: 01111.C186791

Amount of Each Receipt this Period -5000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Michael Pascucci

Mailing Address 454 Grove St

City Needham State MA Zip Code 02492

FEC ID number of contributing federal political committee. **C**

Name of Employer Rose Grove Capital Occupation Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 21 / 2010

Transaction ID: 01111.C186790

Amount of Each Receipt this Period 10000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 9500.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 28 / 78
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) David Pietro	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 9 Wintergreen Lane	Transaction ID: 01111.C186890
	City State Zip Code Sandwich MA 02563	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation DGP Miles Insurance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 10000.00	

B.	Full Name (Last, First, Middle Initial) Michael Porter	Date of Receipt MM / DD / YYYY 11 / 01 / 2010
	Mailing Address 44 Green Hill Rd.	Transaction ID: 01111.C187183
	City State Zip Code Brookline MA 02445	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Harvard Business School Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 2500.00	

C.	Full Name (Last, First, Middle Initial) Benjamin Rajotte	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 182 Beths Ave.	Transaction ID: 01111.C186753
	City State Zip Code Bristol CT 06010	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Information Requested Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	7750.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 78
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Larry Renfro

Mailing Address 5 Dove Ln

City State Zip Code
Andover MA 01810

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Best Effort Sent Best Effort Sent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
10 / 22 / 2010

Transaction ID: 01111.C186826

Amount of Each Receipt this Period
10000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Laura Reynolds

Mailing Address 153 Garfield Road

City State Zip Code
Concord MA 01742

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Information Requested Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
10 / 26 / 2010

Transaction ID: 01111.C186975

Amount of Each Receipt this Period
5000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Edgar Rios

Mailing Address 1650 Tysons Blvd.

City State Zip Code
Mc Lean VA 22102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Information Requested Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
10 / 20 / 2010

Transaction ID: 01111.C186767

Amount of Each Receipt this Period
10000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ 25000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 78
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Richard Russell	Date of Receipt MM / DD / YYYY 11 / 17 / 2010
	Mailing Address 8 Pegan Lane	Transaction ID: 01130.C187242
	City State Zip Code Dover MA 02030	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 2000.00	

B.	Full Name (Last, First, Middle Initial) Kambiz Shahbazi	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 425 East 58th Street, Apartment 4E	Transaction ID: 01111.C186837
	City State Zip Code New York NY 10022	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Unknown Occupation real estate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 10000.00	

C.	Full Name (Last, First, Middle Initial) Ronald Skates	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 4 Boardman Avenue	Transaction ID: 01111.C186924
	City State Zip Code Manchester MA 01944	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Self-Employed Occupation investor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 4500.00	

SUBTOTAL of Receipts This Page (optional)	13000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 78
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Arthur Winn

Mailing Address 6 Fanueil Hall Marketplace

City State Zip Code
Boston MA 02109

FEC ID number of contributing federal political committee. **C**

Name of Employer Winn Management Occupation President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	9	/	2	0	1	0

Transaction ID: 01111.C187223

Amount of Each Receipt this Period
5000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Claudia Wu

Mailing Address 25 Sewall St

City State Zip Code
Newton MA 02465

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ -5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	1	0

Transaction ID: 01111.C186857

Amount of Each Receipt this Period
-5000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Claudia Wu

Mailing Address 25 Sewall St

City State Zip Code
Newton MA 02465

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	1	0

Transaction ID: 01111.C186856

Amount of Each Receipt this Period
15000.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **15000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 78
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Steven Wymer

Mailing Address 19 Marlboro St.

City State Zip Code
Boston MA 02116

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fidelity Investments VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	1	0

Transaction ID: 01111.C187177

Amount of Each Receipt this Period
15000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	15000.00
TOTAL This Period (last page this line number only)	▶	298675.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 78
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial) James Devita, R. Ph.		Date of Receipt
Mailing Address CVS Corporation- Regulatory Compli One CVS Drive		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
City	State	Zip Code
Woonsocket	RI	02895
FEC ID number of contributing federal political committee.		Transaction ID: 01111.C186868
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Name of Employer PAC	Occupation PAC	Receipt
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Republican National Committee		Date of Receipt
Mailing Address 310 First Street SE DO NOT MAIL		<input type="text" value="11"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
City	State	Zip Code
Washington	DC	20003
FEC ID number of contributing federal political committee.		Transaction ID: 01202.C187245
<input type="text" value="C C00003418"/>		Amount of Each Receipt this Period
		<input type="text" value="28000.00"/>
Name of Employer Political Committee	Occupation FEC ID: C00003418	Receipt
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="28000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="33000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="33000.00"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Barrows Barrows Insurance Mailing Address 215 North Main Street City Mansfield State MA Zip Code 02048- Purpose of Disbursement insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01202.E12635 Date of Disbursement 10 / 19 / 2010 Amount of Each Disbursement this Period 520.00 INSURANCE
B.	Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 1270 City Newark State NJ Zip Code 07101-1270 Purpose of Disbursement cc Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01202.E12706 Date of Disbursement 11 / 15 / 2010 Amount of Each Disbursement this Period 2788.06 CC
C.	Full Name (Last, First, Middle Initial) Scr & Associates, LLC Mailing Address 4 Leblanc Dr City Danvers State MA Zip Code 01923- Purpose of Disbursement fundraising consultant fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01202.E12647 Date of Disbursement 10 / 26 / 2010 Amount of Each Disbursement this Period 6000.00 FUNDRAISING CONSULTANT FEE

SUBTOTAL of Disbursements This Page (optional) ▶

9308.06

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 / 78

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Bowditch & Dewey	Transaction ID: 01202.E12728 Date of Disbursement 11 / 08 / 2010
	Mailing Address 310 Main St.	Amount of Each Disbursement this Period 6400.00
	City Worcester State MA Zip Code 01615-	
	Purpose of Disbursement legal expenses Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		LEGAL EXPENSES

B.	Full Name (Last, First, Middle Initial) Bowditch & Dewey	Transaction ID: 01202.E12742 Date of Disbursement 11 / 11 / 2010
	Mailing Address 310 Main St.	Amount of Each Disbursement this Period 15400.00
	City Worcester State MA Zip Code 01615-	
	Purpose of Disbursement legal expenses Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		LEGAL EXPENSES

C.	Full Name (Last, First, Middle Initial) Meridian Air Charter	Transaction ID: 01202.E12727 Date of Disbursement 10 / 30 / 2010
	Mailing Address 485 Industrial Ave	Amount of Each Disbursement this Period 11003.74
	City Teterboro State NJ Zip Code 07608-	
	Purpose of Disbursement charter Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CHARTER

SUBTOTAL of Disbursements This Page (optional) ▶

32803.74

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Boston Balloon Events	Transaction ID: 01202.E12722 Date of Disbursement 10 / 30 / 2010
	Mailing Address 25 Dry Dock Rd	Amount of Each Disbursement this Period 4000.00
	City Boston State MA Zip Code 02210- Purpose of Disbursement balloons Candidate Name	BALLOONS
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Boston Balloon Events	Transaction ID: 01202.E12734 Date of Disbursement 11 / 11 / 2010
	Mailing Address 25 Dry Dock Rd	Amount of Each Disbursement this Period 1471.88
	City Boston State MA Zip Code 02210- Purpose of Disbursement balloons Candidate Name	BALLOONS
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Massachusetts	Transaction ID: 01202.E12675 Date of Disbursement 11 / 08 / 2010
	Mailing Address Landmark Center 401 Park Drive	Amount of Each Disbursement this Period 10453.18
	City Boston State MA Zip Code 02215- Purpose of Disbursement insurance Candidate Name	INSURANCE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	15925.06
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) John Brock	Transaction ID: 01202.E12650 Date of Disbursement 10 / 26 / 2010
	Mailing Address 25 Windy Ridge Pkwy	Amount of Each Disbursement this Period 6500.00
	City Atlanta State GA Zip Code 30339-	
	Purpose of Disbursement reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSEMENT

B.	Full Name (Last, First, Middle Initial) Tim Buckley	Transaction ID: 01202.E12613 Date of Disbursement 10 / 14 / 2010
	Mailing Address 55 W Broadway #8	Amount of Each Disbursement this Period 1002.13
	City Boston State MA Zip Code 02127-	
	Purpose of Disbursement	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Tim Buckley	Transaction ID: 01202.E12656 Date of Disbursement 10 / 28 / 2010
	Mailing Address 55 W Broadway #8	Amount of Each Disbursement this Period 1002.14
	City Boston State MA Zip Code 02127-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional)	8504.27
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Tim Buckley	Transaction ID: 01202.E12684 Date of Disbursement 11 / 10 / 2010
	Mailing Address 55 W Broadway #8	Amount of Each Disbursement this Period 1002.13
	City Boston State MA Zip Code 02127-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Byte Bulb	Transaction ID: 01202.E12704 Date of Disbursement 11 / 11 / 2010
	Mailing Address The Trimount Company, Inc. 75 Meadowbrook RD.	Amount of Each Disbursement this Period 30.00
	City Hanover State MA Zip Code 02339-	
	Purpose of Disbursement technical support Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		TECHNICAL SUPPORT

C.	Full Name (Last, First, Middle Initial) Fresh City	Transaction ID: 01202.E12733 Date of Disbursement 11 / 11 / 2010
	Mailing Address	Amount of Each Disbursement this Period 1923.87
	City State Zip Code	
	Purpose of Disbursement food expense Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FOOD EXPENSE

SUBTOTAL of Disbursements This Page (optional)	2956.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Boston Coach	Transaction ID: 01202.E12721 Date of Disbursement 10 / 30 / 2010
	Mailing Address 70 Fargo St	Amount of Each Disbursement this Period 4624.43
	City Boston State MA Zip Code 02210- Purpose of Disbursement transportation rental Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	TRANSPORTATION RENTAL

B.	Full Name (Last, First, Middle Initial) Ryan Coleman	Transaction ID: 01202.E12614 Date of Disbursement 10 / 14 / 2010
	Mailing Address 9 Stearms Street	Amount of Each Disbursement this Period 979.03
	City Swampscott State MA Zip Code 01907- Purpose of Disbursement reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	REIMBURSEMENT

C.	Full Name (Last, First, Middle Initial) Ryan Coleman	Transaction ID: 01202.E12657 Date of Disbursement 10 / 28 / 2010
	Mailing Address 9 Stearms Street	Amount of Each Disbursement this Period 979.04
	City Swampscott State MA Zip Code 01907- Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶

6582.50

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Ryan Coleman	Transaction ID: 01202.E12685 Date of Disbursement 11 / 10 / 2010
	Mailing Address 9 Stearms Street	
	City Swampscott State MA Zip Code 01907-	Amount of Each Disbursement this Period 979.03
	Purpose of Disbursement payroll Candidate Name	PAYROLL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Comcast Comcast	Transaction ID: 01202.E12628 Date of Disbursement 10 / 19 / 2010
	Mailing Address PO Box 196	
	City Newark State NJ Zip Code 07101-0196	Amount of Each Disbursement this Period 114.90
	Purpose of Disbursement cable Candidate Name	CABLE
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Hotel Commonwealth	Transaction ID: 01202.E12714 Date of Disbursement 10 / 26 / 2010
	Mailing Address 500 Commonwealth Ave	
	City Boston State MA Zip Code 02215-	Amount of Each Disbursement this Period 10000.00
	Purpose of Disbursement event rental Candidate Name	EVENT RENTAL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	▶	11093.93
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Hotel Commonwealth	Transaction ID: 01202.E12724 Date of Disbursement 10 / 30 / 2010
	Mailing Address 500 Commonwealth Ave	Amount of Each Disbursement this Period 4000.00
	City Boston State MA Zip Code 02215-	
	Purpose of Disbursement hotel rental	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		HOTEL RENTAL

B.	Full Name (Last, First, Middle Initial) Hotel Commonwealth	Transaction ID: 01202.E12735 Date of Disbursement 11 / 11 / 2010
	Mailing Address 500 Commonwealth Ave	Amount of Each Disbursement this Period 6976.84
	City Boston State MA Zip Code 02215-	
	Purpose of Disbursement event rental	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EVENT RENTAL

C.	Full Name (Last, First, Middle Initial) Curley Direct	Transaction ID: 01202.E12712 Date of Disbursement 10 / 26 / 2010
	Mailing Address 15 Fruean Ave	Amount of Each Disbursement this Period 29091.47
	City Yarmouth State MA Zip Code 02664-	
	Purpose of Disbursement mailings	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		MAILINGS

SUBTOTAL of Disbursements This Page (optional)	▶	40068.31
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Curley Direct	Transaction ID: 01202.E12711 Date of Disbursement 10 / 26 / 2010
	Mailing Address 15 Fruean Ave	Amount of Each Disbursement this Period 29091.47
	City Yarmouth State MA Zip Code 02664- Purpose of Disbursement mailings Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	MAILINGS

B.	Full Name (Last, First, Middle Initial) DirecTV DirecTV	Transaction ID: 01202.E12631 Date of Disbursement 10 / 19 / 2010
	Mailing Address PO Box 60036	Amount of Each Disbursement this Period 49.34
	City Los Angeles State CA Zip Code 90060-0036 Purpose of Disbursement satellite Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	SATELLITE

C.	Full Name (Last, First, Middle Initial) Tarah Donoghue	Transaction ID: 01202.E12655 Date of Disbursement 10 / 28 / 2010
	Mailing Address 3 Main Street	Amount of Each Disbursement this Period 1538.71
	City Dover State MA Zip Code 02030- Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL

SUBTOTAL of Disbursements This Page (optional)	▶	30679.52
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Tarah Donoghue	Transaction ID: 01202.E12683 Date of Disbursement 11 / 10 / 2010
	Mailing Address 3 Main Street	Amount of Each Disbursement this Period 1538.70
	City Dover State MA Zip Code 02030- Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL

B.	Full Name (Last, First, Middle Initial) Tara Esfahanian	Transaction ID: 01202.E12643 Date of Disbursement 10 / 22 / 2010
	Mailing Address 177 Upham St.	Amount of Each Disbursement this Period 4987.44
	City Melrose State MA Zip Code 02176- Purpose of Disbursement consulting fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CONSULTING FEE

C.	Full Name (Last, First, Middle Initial) Tara Esfahanian	Transaction ID: 01202.E12644 Date of Disbursement 10 / 22 / 2010
	Mailing Address 177 Upham St.	Amount of Each Disbursement this Period 2500.00
	City Melrose State MA Zip Code 02176- Purpose of Disbursement consulting fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CONSULTING FEE

SUBTOTAL of Disbursements This Page (optional) ▶

9026.14

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

<p>A. Full Name (Last, First, Middle Initial) Tara Esfahanian</p> <p>Mailing Address 177 Upham St.</p> <p>City Melrose State MA Zip Code 02176-</p> <p>Purpose of Disbursement consulting fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12701</p> <p>Date of Disbursement 11 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p>CONSULTING FEE</p>
<p>B. Full Name (Last, First, Middle Initial) Federal Express</p> <p>Mailing Address PO Box 1140</p> <p>City Memphis State TN Zip Code 38101-1140</p> <p>Purpose of Disbursement shipping bill</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12649</p> <p>Date of Disbursement 10 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 63.95</p> <p>SHIPPING BILL</p>
<p>C. Full Name (Last, First, Middle Initial) Federal Express</p> <p>Mailing Address PO Box 1140</p> <p>City Memphis State TN Zip Code 38101-1140</p> <p>Purpose of Disbursement shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12674</p> <p>Date of Disbursement 11 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 49.44</p> <p>SHIPPING</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4113.39

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Anthony Ferrucci	Transaction ID: 01202.E12615 Date of Disbursement 10 / 14 / 2010
	Mailing Address 62 Dwight St. Apt. #1	Amount of Each Disbursement this Period 630.70
	City Brookline State MA Zip Code 02446-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Anthony Ferrucci	Transaction ID: 01202.E12658 Date of Disbursement 10 / 28 / 2010
	Mailing Address 62 Dwight St. Apt. #1	Amount of Each Disbursement this Period 630.69
	City Brookline State MA Zip Code 02446-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Anthony Ferrucci	Transaction ID: 01202.E12678 Date of Disbursement 11 / 08 / 2010
	Mailing Address 62 Dwight St. Apt. #1	Amount of Each Disbursement this Period 178.10
	City Brookline State MA Zip Code 02446-	
	Purpose of Disbursement reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional)	▶	1439.49
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Anthony Ferrucci	Transaction ID: 01202.E12686 Date of Disbursement 11 / 10 / 2010
	Mailing Address 62 Dwight St. Apt. #1	Amount of Each Disbursement this Period 630.70
	City Brookline State MA Zip Code 02446-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Full Impact Production	Transaction ID: 01202.E12629 Date of Disbursement 10 / 19 / 2010
	Mailing Address 97 Betts Rd.	Amount of Each Disbursement this Period 20000.00
	City Belmont State MA Zip Code 02478-	
	Purpose of Disbursement consulting Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CONSULTING

C.	Full Name (Last, First, Middle Initial) Kaitlyn Greeley	Transaction ID: 01202.E12616 Date of Disbursement 10 / 14 / 2010
	Mailing Address 34 Fresno St.	Amount of Each Disbursement this Period 960.33
	City Boston State MA Zip Code 02131-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional)	▶	21591.03
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Kaitlyn Greeley	Transaction ID: 01202.E12659
	Mailing Address 34 Fresno St.	Date of Disbursement 10 / 28 / 2010
	City Boston State MA Zip Code 02131-	Amount of Each Disbursement this Period 960.33
	Purpose of Disbursement payroll Candidate Name	PAYROLL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Kaitlyn Greeley	Transaction ID: 01202.E12677
	Mailing Address 34 Fresno St.	Date of Disbursement 11 / 08 / 2010
	City Boston State MA Zip Code 02131-	Amount of Each Disbursement this Period 382.73
	Purpose of Disbursement reimbursement Candidate Name	REIMBURSEMENT
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Kaitlyn Greeley	Transaction ID: 01202.E12687
	Mailing Address 34 Fresno St.	Date of Disbursement 11 / 10 / 2010
	City Boston State MA Zip Code 02131-	Amount of Each Disbursement this Period 960.33
	Purpose of Disbursement payroll Candidate Name	PAYROLL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ► **2303.39**

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) National Grid	Transaction ID: 01202.E12639
	Mailing Address 179 Medford St.	Date of Disbursement 10 / 22 / 2010
	City Malden State MA Zip Code 02148-	Amount of Each Disbursement this Period 275.18
	Purpose of Disbursement electric bill	ELECTRIC BILL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) National Grid	Transaction ID: 01202.E12672
	Mailing Address 179 Medford St.	Date of Disbursement 11 / 08 / 2010
	City Malden State MA Zip Code 02148-	Amount of Each Disbursement this Period 47.87
	Purpose of Disbursement electricity bill	ELECTRICITY BILL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Campaign Homebank	Transaction ID: 01202.E12710
	Mailing Address One Walnut St. Suite A	Date of Disbursement 10 / 22 / 2010
	City Boston State MA Zip Code 02108-	Amount of Each Disbursement this Period 16000.00
	Purpose of Disbursement autocalls	AUTOCALLS
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	16323.05
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Campaign Homebank	Transaction ID: 01202.E12716 Date of Disbursement
	Mailing Address One Walnut St. Suite A	<input type="text" value="10"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Boston State MA Zip Code 02108-	Amount of Each Disbursement this Period
	Purpose of Disbursement autocalles Candidate Name	<input type="text" value="10000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type AUTOCALLS
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Kirsten Hughes	Transaction ID: 01202.E12617 Date of Disbursement
	Mailing Address 72 Davis Street	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Quincy State MA Zip Code 02170-	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll Candidate Name	<input type="text" value="1015.53"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type PAYROLL
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Kirsten Hughes	Transaction ID: 01202.E12660 Date of Disbursement
	Mailing Address 72 Davis Street	<input type="text" value="10"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Quincy State MA Zip Code 02170-	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll Candidate Name	<input type="text" value="1013.21"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type PAYROLL
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="12028.74"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Kirsten Hughes	Transaction ID: 01202.E12688 Date of Disbursement 11 / 10 / 2010
	Mailing Address 72 Davis Street	Amount of Each Disbursement this Period 1013.22
	City Quincy State MA Zip Code 02170- Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL

B.	Full Name (Last, First, Middle Initial) Full Impact Productions	Transaction ID: 01202.E12737 Date of Disbursement 11 / 11 / 2010
	Mailing Address 97 Betts Rd	Amount of Each Disbursement this Period 4000.00
	City Belmont State MA Zip Code 02478- Purpose of Disbursement candidate operations assistance Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CANDIDATE OPERATIONS ASSI- STANCE

C.	Full Name (Last, First, Middle Initial) Full Impact Productions	Transaction ID: 01202.E12736 Date of Disbursement 11 / 11 / 2010
	Mailing Address 97 Betts Rd	Amount of Each Disbursement this Period 4000.00
	City Belmont State MA Zip Code 02478- Purpose of Disbursement candidate operations consulting Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CANDIDATE OPERATIONS CONS- ULTING

SUBTOTAL of Disbursements This Page (optional)	9013.22
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Cims Inc	Transaction ID: 01202.E12720 Date of Disbursement 10 / 30 / 2010
	Mailing Address PO Box 600113	Amount of Each Disbursement this Period 3369.98
	City Newton State MA Zip Code 02460-	
	Purpose of Disbursement software Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SOFTWARE

B.	Full Name (Last, First, Middle Initial) Cims Inc	Transaction ID: 01202.E12732 Date of Disbursement 11 / 11 / 2010
	Mailing Address PO Box 600113	Amount of Each Disbursement this Period 2141.88
	City Newton State MA Zip Code 02460-	
	Purpose of Disbursement software Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SOFTWARE

C.	Full Name (Last, First, Middle Initial) Political Ink Inc	Transaction ID: 01202.E12637 Date of Disbursement 10 / 19 / 2010
	Mailing Address Martin Baker 2924 Bells Road	Amount of Each Disbursement this Period 2065.74
	City Richmond State VA Zip Code 23234-	
	Purpose of Disbursement mailer Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		MAILER

SUBTOTAL of Disbursements This Page (optional)	7577.60
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Semcasting Inc	Transaction ID: 01202.E12709 Date of Disbursement 10 / 22 / 2010
	Mailing Address 300 Brick Stone suite 701	Amount of Each Disbursement this Period 5000.00
	City Andover State MA Zip Code 01810-	
	Purpose of Disbursement email deployment	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EMAIL DEPLOYMENT

B.	Full Name (Last, First, Middle Initial) Amy Kelly	Transaction ID: 01202.E12681 Date of Disbursement 11 / 08 / 2010
	Mailing Address 157 Rice Road	Amount of Each Disbursement this Period 500.00
	City Quincy State MA Zip Code 02170-	
	Purpose of Disbursement photograhay	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PHOTOGRAHY

C.	Full Name (Last, First, Middle Initial) Nick Lehr	Transaction ID: 01202.E12618 Date of Disbursement 10 / 14 / 2010
	Mailing Address 38 Saunders Rd.	Amount of Each Disbursement this Period 1002.13
	City Boston State MA Zip Code 02134-	
	Purpose of Disbursement payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶

6502.13

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Nick Lehr	Transaction ID: 01202.E12661 Date of Disbursement 10 / 28 / 2010
	Mailing Address 38 Saunders Rd.	Amount of Each Disbursement this Period 1002.14
	City Boston State MA Zip Code 02134-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Nick Lehr	Transaction ID: 01202.E12689 Date of Disbursement 11 / 10 / 2010
	Mailing Address 38 Saunders Rd.	Amount of Each Disbursement this Period 1002.13
	City Boston State MA Zip Code 02134-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Kristen Lepore	Transaction ID: 01202.E12699 Date of Disbursement 11 / 11 / 2010
	Mailing Address 47 Driscoll Street	Amount of Each Disbursement this Period 2500.00
	City Peabody State MA Zip Code 01960-	
	Purpose of Disbursement consulting fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CONSULTING FEE

SUBTOTAL of Disbursements This Page (optional)	▶	4504.27
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

<p>A. Full Name (Last, First, Middle Initial) Nathan Little</p> <p>Mailing Address 83 Congreeve</p> <p>City Boston State MA Zip Code 02131-</p> <p>Purpose of Disbursement payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12619</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 2145.65</p> <p>PAYROLL</p>
<p>B. Full Name (Last, First, Middle Initial) Nathan Little</p> <p>Mailing Address 83 Congreeve</p> <p>City Boston State MA Zip Code 02131-</p> <p>Purpose of Disbursement payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12662</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 2145.66</p> <p>PAYROLL</p>
<p>C. Full Name (Last, First, Middle Initial) Nathan Little</p> <p>Mailing Address 83 Congreeve</p> <p>City Boston State MA Zip Code 02131-</p> <p>Purpose of Disbursement reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12680</p> <p>Date of Disbursement 11 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 88.00</p> <p>REIMBURSEMENT</p>

SUBTOTAL of Disbursements This Page (optional)	4379.31
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Nathan Little	Transaction ID: 01202.E12690 Date of Disbursement 11 / 10 / 2010
	Mailing Address 83 Congreeve	Amount of Each Disbursement this Period 2145.65
	City Boston State MA Zip Code 02131-	
	Purpose of Disbursement payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Melissa Lucas	Transaction ID: 01202.E12641 Date of Disbursement 10 / 22 / 2010
	Mailing Address 22 Slayton Road	Amount of Each Disbursement this Period 2500.00
	City Melrose State MA Zip Code 02176-	
	Purpose of Disbursement consultant fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CONSULTANT FEE

C.	Full Name (Last, First, Middle Initial) Melissa Lucas	Transaction ID: 01202.E12642 Date of Disbursement 10 / 22 / 2010
	Mailing Address 22 Slayton Road	Amount of Each Disbursement this Period 4241.00
	City Melrose State MA Zip Code 02176-	
	Purpose of Disbursement confulting fee	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		CONFULTING FEE

SUBTOTAL of Disbursements This Page (optional)	8886.65
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Melissa Lucas Mailing Address 22 Slayton Road City Melrose State MA Zip Code 02176- Purpose of Disbursement consulting fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01202.E12700 Date of Disbursement 11 / 11 / 2010 Amount of Each Disbursement this Period 4121.00 CONSULTING FEE	
B.	Full Name (Last, First, Middle Initial) Konica Minolta Business Systems Mailing Address P.O. Box 7247-0322 City Philadelphia State PA Zip Code 19170-0322 Purpose of Disbursement printer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01202.E12633 Date of Disbursement 10 / 19 / 2010 Amount of Each Disbursement this Period 782.83 PRINTER	
C.	Full Name (Last, First, Middle Initial) Konica Minolta Business Systems Mailing Address P.O. Box 7247-0322 City Philadelphia State PA Zip Code 19170-0322 Purpose of Disbursement printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01202.E12705 Date of Disbursement 11 / 11 / 2010 Amount of Each Disbursement this Period 2430.75 PRINTING	

SUBTOTAL of Disbursements This Page (optional) ▶

7334.58

TOTAL This Period (last page this line number only) ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Magan Munson	Transaction ID: 01202.E12620 Date of Disbursement 10 / 14 / 2010
	Mailing Address 209 bunker hill st Apt 1	Amount of Each Disbursement this Period 1140.96
	City Boston State MA Zip Code 02129-	
	Purpose of Disbursement payroll	PAYROLL
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Magan Munson	Transaction ID: 01202.E12630 Date of Disbursement 10 / 19 / 2010
	Mailing Address 209 bunker hill st Apt 1	Amount of Each Disbursement this Period 75.99
	City Boston State MA Zip Code 02129-	
	Purpose of Disbursement reimbursement	REIMBURSEMENT
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Magan Munson	Transaction ID: 01202.E12648 Date of Disbursement 10 / 26 / 2010
	Mailing Address 209 bunker hill st Apt 1	Amount of Each Disbursement this Period 261.17
	City Boston State MA Zip Code 02129-	
	Purpose of Disbursement reimbursement	REIMBURSEMENT
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1478.12
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

<p>A. Full Name (Last, First, Middle Initial) Magan Munson</p> <p>Mailing Address 209 bunker hill st Apt 1</p> <p>City Boston State MA Zip Code 02129-</p> <p>Purpose of Disbursement payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12663 Date of Disbursement: 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 1136.58</p> <p>PAYROLL</p>
<p>B. Full Name (Last, First, Middle Initial) Magan Munson</p> <p>Mailing Address 209 bunker hill st Apt 1</p> <p>City Boston State MA Zip Code 02129-</p> <p>Purpose of Disbursement payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12691 Date of Disbursement: 11 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 1136.60</p> <p>PAYROLL</p>
<p>C. Full Name (Last, First, Middle Initial) Magan Munson</p> <p>Mailing Address 209 bunker hill st Apt 1</p> <p>City Boston State MA Zip Code 02129-</p> <p>Purpose of Disbursement reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12702 Date of Disbursement: 11 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 54.20</p> <p>REIMBURSEMENT</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2327.38

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

<p>A. Full Name (Last, First, Middle Initial) Jennifer Nassour</p> <p>Mailing Address 49 Chelsea St., Unit C1-307</p> <p>City Boston State MA Zip Code 02129-</p> <p>Purpose of Disbursement reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12676</p> <p>Date of Disbursement 11 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 480.45</p> <p>REIMBURSEMENT</p>
<p>B. Full Name (Last, First, Middle Initial) Tim Obrien</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12739</p> <p>Date of Disbursement 11 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 8653.85</p> <p>PAYROLL</p>
<p>C. Full Name (Last, First, Middle Initial) House Of Blues</p> <p>Mailing Address 15 Landsdowne St</p> <p>City Boston State MA Zip Code 02105-</p> <p>Purpose of Disbursement event rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12715</p> <p>Date of Disbursement 10 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 8000.00</p> <p>EVENT RENTAL</p>

SUBTOTAL of Disbursements This Page (optional) ▶

17134.30

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) House Of Blues	Transaction ID: 01202.E12723 Date of Disbursement 10 / 30 / 2010
	Mailing Address 15 Landsdowne St	Amount of Each Disbursement this Period 20000.00
	City Boston State MA Zip Code 02105-	
	Purpose of Disbursement event fee	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EVENT FEE

B.	Full Name (Last, First, Middle Initial) Cambridge Offset	Transaction ID: 01202.E12729 Date of Disbursement 11 / 11 / 2010
	Mailing Address	Amount of Each Disbursement this Period 6747.00
	City State Zip Code	
	Purpose of Disbursement invitation printing	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		INVITATION PRINTING

C.	Full Name (Last, First, Middle Initial) Rp One Owner	Transaction ID: 01202.E12717 Date of Disbursement 10 / 29 / 2010
	Mailing Address PO Box 845516	Amount of Each Disbursement this Period 9000.00
	City Boston State MA Zip Code 02105-	
	Purpose of Disbursement parking space rental	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PARKING SPACE RENTAL

SUBTOTAL of Disbursements This Page (optional)	▶	35747.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Peter Pan</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement transportation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12731</p> <p>Date of Disbursement 11 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 1025.00</p> <p>TRANSPORTATION</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Peter Pan</p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement transportation rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12740</p> <p>Date of Disbursement 11 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 2725.00</p> <p>TRANSPORTATION RENTAL</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Boston Park Plaza</p> <p>Mailing Address 64 Arlington St.</p> <p>City Boston State MA Zip Code 02116-</p> <p>Purpose of Disbursement event fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12653</p> <p>Date of Disbursement 10 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 12111.50</p> <p>EVENT FEE</p>

SUBTOTAL of Disbursements This Page (optional) ▶

15861.50

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Peterson Party Center Mailing Address 139 Swanton St City Winchester State MA Zip Code 01890- Purpose of Disbursement event supplies rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01202.E12725 Date of Disbursement 10 / 30 / 2010 Amount of Each Disbursement this Period 918.00 EVENT SUPPLIES RENTAL	
B.	Full Name (Last, First, Middle Initial) Peterson Party Center Mailing Address 139 Swanton St City Winchester State MA Zip Code 01890- Purpose of Disbursement event supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01202.E12726 Date of Disbursement 10 / 30 / 2010 Amount of Each Disbursement this Period 985.44 EVENT SUPPLIES	
C.	Full Name (Last, First, Middle Initial) Advantage Payroll Services Mailing Address 747 Main Street #222 City Concord State MA Zip Code 01742- Purpose of Disbursement payroll fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 01202.E12626 Date of Disbursement 10 / 14 / 2010 Amount of Each Disbursement this Period 6909.79 PAYROLL FEE	

SUBTOTAL of Disbursements This Page (optional)	8813.23
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Advantage Payroll Services	Transaction ID: 01202.E12669 Date of Disbursement
	Mailing Address 747 Main Street #222	<input type="text" value="10"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Concord State MA Zip Code 01742-	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll fee	<input type="text" value="6907.10"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL FEE

B.	Full Name (Last, First, Middle Initial) Advantage Payroll Services	Transaction ID: 01202.E12697 Date of Disbursement
	Mailing Address 747 Main Street #222	<input type="text" value="11"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Concord State MA Zip Code 01742-	Amount of Each Disbursement this Period
	Purpose of Disbursement payroll	<input type="text" value="6908.32"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Noodle Island Photography	Transaction ID: 01202.E12741 Date of Disbursement
	Mailing Address	<input type="text" value="11"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City State Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement event photography	<input type="text" value="300.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EVENT PHOTOGRAPHY

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="14115.42"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

<p>A. Full Name (Last, First, Middle Initial) Ox-eye Properties</p> <p>Mailing Address 119 South 14th St. Suite 300</p> <p>City Richmond State VA Zip Code 23219-</p> <p>Purpose of Disbursement rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12708</p> <p>Date of Disbursement 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 569.52</p> <p>RENT</p>
<p>B. Full Name (Last, First, Middle Initial) Ox-eye Properties</p> <p>Mailing Address 119 South 14th St. Suite 300</p> <p>City Richmond State VA Zip Code 23219-</p> <p>Purpose of Disbursement rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12707</p> <p>Date of Disbursement 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 4434.00</p> <p>RENT</p>
<p>C. Full Name (Last, First, Middle Initial) Dc Rentals</p> <p>Mailing Address 5 Whitmere Rd</p> <p>City Revere State MA Zip Code 02151-</p> <p>Purpose of Disbursement equip rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12719</p> <p>Date of Disbursement 10 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>EQUIP RENTAL</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6003.52

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Massachusetts Republican State Com</p> <p>Mailing Address 85 Merrimac St. Suite 400</p> <p>City Boston State MA Zip Code 02114-</p> <p>Purpose of Disbursement transfer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12627</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="29950.00"/></p> <p>TRANSFER</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Massachusetts Republican State Com</p> <p>Mailing Address 85 Merrimac St. Suite 400</p> <p>City Boston State MA Zip Code 02114-</p> <p>Purpose of Disbursement transfer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12640</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="15000.00"/></p> <p>TRANSFER</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Massachusetts Republican State Com</p> <p>Mailing Address 85 Merrimac St. Suite 400</p> <p>City Boston State MA Zip Code 02114-</p> <p>Purpose of Disbursement transfer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12645</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="30000.00"/></p> <p>TRANSFER</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="74950.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Massachusetts Republican State Com	Transaction ID: 01202.E12651 Date of Disbursement 10 / 26 / 2010
	Mailing Address 85 Merrimac St. Suite 400	Amount of Each Disbursement this Period 4500.00
	City Boston State MA Zip Code 02114-	
	Purpose of Disbursement transfer	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		TRANSFER

B.	Full Name (Last, First, Middle Initial) Massachusetts Republican State Com	Transaction ID: 01202.E12682 Date of Disbursement 11 / 08 / 2010
	Mailing Address 85 Merrimac St. Suite 400	Amount of Each Disbursement this Period 10000.00
	City Boston State MA Zip Code 02114-	
	Purpose of Disbursement transfer	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		TRANSFER

C.	Full Name (Last, First, Middle Initial) Michael Rigas	Transaction ID: 01202.E12621 Date of Disbursement 10 / 14 / 2010
	Mailing Address 24 Concord Ave, Apt 415	Amount of Each Disbursement this Period 1523.41
	City Cambridge State MA Zip Code 02138-	
	Purpose of Disbursement payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional)	▶	16023.41
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Michael Rigas	Transaction ID: 01202.E12664 Date of Disbursement 10 / 28 / 2010
	Mailing Address 24 Concord Ave, Apt 415	Amount of Each Disbursement this Period 1516.34
	City Cambridge State MA Zip Code 02138-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Michael Rigas	Transaction ID: 01202.E12692 Date of Disbursement 11 / 10 / 2010
	Mailing Address 24 Concord Ave, Apt 415	Amount of Each Disbursement this Period 151.62
	City Cambridge State MA Zip Code 02138-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Seaport Hotel	Transaction ID: 01202.E12638 Date of Disbursement 10 / 22 / 2010
	Mailing Address 1 Seaport Lane	Amount of Each Disbursement this Period 4142.83
	City Boston State MA Zip Code 02114-	
	Purpose of Disbursement event fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		EVENT FEE

SUBTOTAL of Disbursements This Page (optional)	5810.79
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

<p>A. Full Name (Last, First, Middle Initial) Fast Signs</p> <p>Mailing Address 693 Cochituaters</p> <p>City Framingham State MA Zip Code 01701-</p> <p>Purpose of Disbursement signs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12718</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="243.81"/></p> <p>SIGNS</p>
<p>B. Full Name (Last, First, Middle Initial) Fast Signs</p> <p>Mailing Address 693 Cochituaters</p> <p>City Framingham State MA Zip Code 01701-</p> <p>Purpose of Disbursement signs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12730</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="343.13"/></p> <p>SIGNS</p>
<p>C. Full Name (Last, First, Middle Initial) Sprint/Nextel</p> <p>Mailing Address PO Box 17990</p> <p>City Denver State CO Zip Code 80217-</p> <p>Purpose of Disbursement phone bill</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12671</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="83.66"/></p> <p>PHONE BILL</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="670.60"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

<p>A. Full Name (Last, First, Middle Initial) Public Opinion Strategies</p> <p>Mailing Address 277 South Washington Street, Suite</p> <p>City Alexandria State VA Zip Code 22314-</p> <p>Purpose of Disbursement polling fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12632</p> <p>Date of Disbursement 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 22000.00</p> <p>POLLING FEE</p>
<p>B. Full Name (Last, First, Middle Initial) Public Opinion Strategies</p> <p>Mailing Address 277 South Washington Street, Suite</p> <p>City Alexandria State VA Zip Code 22314-</p> <p>Purpose of Disbursement polling</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12636</p> <p>Date of Disbursement 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 22000.00</p> <p>POLLING</p>
<p>C. Full Name (Last, First, Middle Initial) Public Opinion Strategies</p> <p>Mailing Address 277 South Washington Street, Suite</p> <p>City Alexandria State VA Zip Code 22314-</p> <p>Purpose of Disbursement polling fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 01202.E12652</p> <p>Date of Disbursement 10 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 18000.00</p> <p>POLLING FEE</p>

SUBTOTAL of Disbursements This Page (optional)	62000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Public Opinion Strategies	Transaction ID: 01202.E12654 Date of Disbursement
	Mailing Address 277 South Washington Street, Suite	<input type="text" value="10"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Alexandria State VA Zip Code 22314-	Amount of Each Disbursement this Period
	Purpose of Disbursement polling Candidate Name	<input type="text" value="28000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type POLLING
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Public Opinion Strategies	Transaction ID: 01202.E12698 Date of Disbursement
	Mailing Address 277 South Washington Street, Suite	<input type="text" value="11"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Alexandria State VA Zip Code 22314-	Amount of Each Disbursement this Period
	Purpose of Disbursement polling fee Candidate Name	<input type="text" value="7000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type POLLING FEE
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Direct Mail Systems	Transaction ID: 01202.E12634 Date of Disbursement
	Mailing Address 12450 Automobile Boulevard	<input type="text" value="10"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Clearwater State FL Zip Code 33762-	Amount of Each Disbursement this Period
	Purpose of Disbursement direct mail Candidate Name	<input type="text" value="395.28"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type DIRECT MAIL
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="35395.28"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Pierce Tria	Transaction ID: 01202.E12622
	Mailing Address 210 Brooks Ben	Date of Disbursement 10 / 14 / 2010
	City Princeton State NJ Zip Code 08540-	Amount of Each Disbursement this Period 1082.54
	Purpose of Disbursement payroll Candidate Name	PAYROLL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Pierce Tria	Transaction ID: 01202.E12665
	Mailing Address 210 Brooks Ben	Date of Disbursement 10 / 28 / 2010
	City Princeton State NJ Zip Code 08540-	Amount of Each Disbursement this Period 1082.55
	Purpose of Disbursement payroll Candidate Name	PAYROLL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Pierce Tria	Transaction ID: 01202.E12693
	Mailing Address 210 Brooks Ben	Date of Disbursement 11 / 10 / 2010
	City Princeton State NJ Zip Code 08540-	Amount of Each Disbursement this Period 1082.55
	Purpose of Disbursement payroll Candidate Name	PAYROLL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	3247.64
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) Verizon Verizon Wireless	Transaction ID: 01202.E12646
	Mailing Address PO Box 5029	Date of Disbursement 10 / 26 / 2010
	City Wallingford State CT Zip Code 06492-	Amount of Each Disbursement this Period 344.97
	Purpose of Disbursement phone bill Candidate Name	PHONE BILL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Verizon Verizon Wireless	Transaction ID: 01202.E12673
	Mailing Address PO Box 5029	Date of Disbursement 11 / 08 / 2010
	City Wallingford State CT Zip Code 06492-	Amount of Each Disbursement this Period 139.53
	Purpose of Disbursement phone bill Candidate Name	PHONE BILL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Verizon Verizon Wireless	Transaction ID: 01202.E12703
	Mailing Address PO Box 5029	Date of Disbursement 11 / 11 / 2010
	City Wallingford State CT Zip Code 06492-	Amount of Each Disbursement this Period 679.70
	Purpose of Disbursement phone bill Candidate Name	PHONE BILL
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

1164.20

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) William Walker	Transaction ID: 01202.E12623 Date of Disbursement 10 / 14 / 2010
	Mailing Address 24 Sidlaw Road Apt 3	Amount of Each Disbursement this Period 1410.34
	City Brighton State MA Zip Code 02135-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) William Walker	Transaction ID: 01202.E12666 Date of Disbursement 10 / 28 / 2010
	Mailing Address 24 Sidlaw Road Apt 3	Amount of Each Disbursement this Period 1410.35
	City Brighton State MA Zip Code 02135-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) William Walker	Transaction ID: 01202.E12679 Date of Disbursement 11 / 08 / 2010
	Mailing Address 24 Sidlaw Road Apt 3	Amount of Each Disbursement this Period 644.03
	City Brighton State MA Zip Code 02135-	
	Purpose of Disbursement reimbursement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REIMBURSEMENT

SUBTOTAL of Disbursements This Page (optional) ▶

3464.72

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A.	Full Name (Last, First, Middle Initial) William Walker	Transaction ID: 01202.E12694 Date of Disbursement 11 / 10 / 2010
	Mailing Address 24 Sidlaw Road Apt 3	Amount of Each Disbursement this Period 1410.34
	City Brighton State MA Zip Code 02135-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

B.	Full Name (Last, First, Middle Initial) Matthew Wood	Transaction ID: 01202.E12624 Date of Disbursement 10 / 14 / 2010
	Mailing Address 33D Westvale Meadows	Amount of Each Disbursement this Period 949.02
	City Concord State MA Zip Code 01742-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

C.	Full Name (Last, First, Middle Initial) Matthew Wood	Transaction ID: 01202.E12667 Date of Disbursement 10 / 28 / 2010
	Mailing Address 33D Westvale Meadows	Amount of Each Disbursement this Period 949.01
	City Concord State MA Zip Code 01742-	
	Purpose of Disbursement payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶

3308.37

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A.

Full Name (Last, First, Middle Initial)

Mike Yacobian

Mailing Address 64 Wellesley St

City State Zip Code
Weston MA 02493-

Purpose of Disbursement
payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 01202.E12696

Date of Disbursement

11 / 10 / 2010

Amount of Each Disbursement this Period

979.03

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

979.03

TOTAL This Period (last page this line number only)

584345.99

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lexis-Nexis			Nature of Debt (Purpose): Original debt for research party related
Mailing Address PO Box 7247-7090			
City Philadelphia	State PA	ZIP Code 19170-	

Outstanding Balance Beginning This Period <input type="text" value="250.00"/>		Transaction ID: LS90513.E11275	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="250.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lexis-Nexis			Nature of Debt (Purpose): Original debt for research party related
Mailing Address PO Box 7247-7090			
City Philadelphia	State PA	ZIP Code 19170-	

Outstanding Balance Beginning This Period <input type="text" value="250.00"/>		Transaction ID: LS90513.E11276	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="250.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Lexis-Nexis			Nature of Debt (Purpose): Original debt for research party related
Mailing Address PO Box 7247-7090			
City Philadelphia	State PA	ZIP Code 19170-	

Outstanding Balance Beginning This Period <input type="text" value="1250.00"/>		Transaction ID: LS90513.E11277	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1250.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1750.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 78 / 78	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect	Nature of Debt (Purpose): Original Debt for telemar- keting non-fea party rela- ted
Mailing Address 7300 Hudson Blvd. Ste	
City State ZIP Code Saint Paul MN 55128-	

Outstanding Balance Beginning This Period	Transaction ID: LS91217.E11763	
3910.20		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	3910.20

1) SUBTOTALS This Period This Page (optional).....	3910.20
2) TOTALS This Period (last page this line number only).....	5660.20
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	5660.20